| ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address): | FOR COURT USE ONLY |
|--|--------------------------------|
| | |
| | |
| TELEPHONE NO.: FAX NO.: | |
| ATTORNEY FOR (Name): | |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO FAMILY COURT BUILDING, 1555 6TH AVE., SAN DIEGO, CA 92101-3294 MADGE BRADLEY BUILDING, 1409 4TH AVE., SAN DIEGO, CA 92101-3105 NORTH COUNTY DIVISION, 325 S. MELROSE DR., VISTA, CA 92081-6651 EAST COUNTY DIVISION, 250 E. MAIN ST., EL CAJON, CA 92020-3941 SOUTH COUNTY DIVISION, 500 3RD AVE., CHULA VISTA, CA 91910-5649 | |
| PETITIONER(S) | |
| RESPONDENT(S) | |
| FAMILY LAW CERTIFICATE OF ASSIGNMENT (Superior Court Rules, Division V, Rule 5.6) | CASE NUMBER |
| | |
| THIS FORM IS REQUIRED IN ALL NEW FAMILY LAW CASES (EXCEPT CASI DIVISION). | ES HEARD BY THE FAMILY SUPPORT |
| I declare that this action is properly filed at the (check one) | |
| ☐ Central Division, Family Law Courthouse (6th Avenue, San Diego) ☐ Central Division, Madge Bradley Building (4th Avenue, San Diego) ☐ South County Division (3rd Avenue, Chula Vista) ☐ East County Division (East Main Street, El Cajon) ☐ North county Division (South Melrose Drive, Vista) | |
| because the (check at least one) | |
| □ petitioner/plaintiff□ respondent/defendant□ other: | |
| reside(s) within the branch court boundaries pursuant to Superior Court Rules, Division V, Rule 5.6. | |
| I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct. | |
| Date: | |
| Signature of Party or Atte | orney |
| | |